	ACORD CERTIF	FICATE OF LIAB	ILITY INS	URANCI	E C	DATE (MM/DD/YY)	
ROI	DUCER	9	ONLY AN	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
				INSURERS A	AFFORDING COVERAG	GE	
U	RED		INSURER A:				
			INSURER B:				
		ש	INSURER C:				
			INSURER D:				
COVERAGES				INSURER E:			
TI AI	HE POLICIES OF INSURANCE LISTED NY REQUIREMENT, TERM OR CONI AY PERTAIN, THE INSURANCE AFFO	D BELOW HAVE BEEN ISSUED TO THE DITION OF ANY CONTRACT OR OTH DRDED BY THE POLICIES DESCRIBEI IN MAY HAVE BEEN REDUCED BY PA	ER DOCUMENT WITH HEREIN IS SUBJECT	H RESPECT TO WE	HICH THIS CERTIFICATE I	MAY BE ISSUED OF	
R	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMI	TS	
_	GENERAL LIABILITY			2.1.2 (Min. 20/11/	EACH OCCURRENCE	\$	
	COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$	
	CLAIMS MADE OCCUR		-15		MED EXP (Any one person)	\$	
		SAN	PLE	ate of	PERSONAL & ADV INJURY	\$	
		37.11	nd to Certifica	onts	GENERAL AGGREGATE	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:	Lattors Correspon	a Requirem	IEITIO	PRODUCTS - COMP/OP AGG	\$	
	POLICY PRO- JECT LOC	Letters correspon	106 1103				
	AUTOMOBILE LIABILITY X ANY AUTO	Letters corresponding Liability Insurar on ne	ext page.		COMBINED SINGLE LIMIT (Ea accident)	\$75,000.00	
	X ALL OWNED AUTOS SCHEDULED AUTOS		(BODILY INJURY OF (Per person)	\$25,000.00	
	HIRED AUTOS X NON-OWNED AUTOS OF				BODILY INJURY (Per accident)	\$50,000.00	
			0	r	PROPERTY DAMAGE (Per accident)	\$25,000.00	
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$75,000.00	
	X ANY AUTO		(OTHER THAN AUTO ONLY: AGG	\$	
	EXCESS LIABILITY				EACH OCCURRENCE	\$	
	OCCUR CLAIMS MADE				AGGREGATE	\$	
						\$	
	DEDUCTIBLE					\$	
	RETENTION \$					\$	
	WORKERS COMPENSATION AND				WC STATU- OTH- TORY LIMITS ER		
	EMPLOYERS' LIABILITY				E.L. EACH ACCIDENT	\$	
					E.L. DISEASE - EA EMPLOYEE	\$	
					E.L. DISEASE - POLICY LIMIT	\$	
	OTHER						
	CRIPTION OF OPERATIONS/LOCATIONS/VF	HICLES/EXCLUSIONS ADDED BY ENDORSEM	ENT/SPECIAL PROVISION	ls			
	PRIPTION OF OPERATIONS/LOCATIONS/VEH	HICLES/EXCLUSIONS ADDED BY ENDORSEM	ENT/SPECIAL PROVISION	s			
F	RTIFICATE HOLDER ADD	OITIONAL INSURED; INSURER LETTER:	CANCELLAT	ION		0	
				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATIO			
ALABAMA DEPARTMENT OF REVENUE SALES, USE & BUSINESS TAX DIVISION PO BOX 327550			DATE THEREOF	date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents of			
			NOTICE TO THE				
			IMPOSE NO OBI				
	MONTGOMERY, AL 3		REPRESENTATIVES.				
		AUTHORIZED REF	AUTHORIZED REPRESENTATIVE				

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